

HOUSE BILL 1167

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By: **Delegates Reznik, Bohanan, James, A. Kelly, Lee, A. Miller, and Sophocleus**

Introduced and read first time: February 10, 2012

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Cigarette Restitution Fund – Lung Cancer Screening and Biotechnology**

3 FOR the purpose of establishing a Lung Cancer Screening Component in the Cancer
4 Prevention, Education, Screening, and Treatment Program; providing for the
5 purpose of the Lung Cancer Screening Component; establishing the Lung
6 Cancer Medical Committee; providing for the membership of the committee;
7 providing for the selection of committee members; requiring the committee to
8 consist of certain individuals with certain expertise; establishing the purpose of
9 the committee; requiring the composition of the committee to reflect the racial
10 and gender diversity of the State; providing for the length of a term of a member
11 of the committee; authorizing the Governor to remove a member of the
12 committee under certain circumstances; authorizing the committee to take
13 action with an affirmative vote of a majority of its members; prohibiting a
14 member of the committee from receiving certain compensation; providing that a
15 member of the committee may receive reimbursement for certain expenses;
16 requiring the Governor to include a certain amount of funding in the budget for
17 the Lung Cancer Screening Component; requiring the committee to distribute
18 certain funds in a certain manner through the use of certain testing vouchers;
19 authorizing the Department of Health and Mental Hygiene to make eligible
20 reimbursement vouchers for different types of testing; requiring certain testing
21 vouchers to be distributed to certain licensed physicians in Maryland; requiring
22 an application and approval by a provider to participate in the Lung Cancer
23 Screening Component; requiring an eligible provider to accept a certain testing
24 voucher as compensation for providing certain services; requiring the
25 Department to reimburse an approved provider for certain services on
26 submission of a certain testing voucher; requiring the Department to establish
27 the reimbursement rates for certain testing vouchers; establishing a Lung
28 Cancer Biotechnology Research and Development Component in the Cancer
29 Prevention, Education, Screening, and Treatment Program; providing that the
30 purpose of the Lung Cancer Biotechnology Research and Development

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Component is to provide grants for certain research and development of certain
2 devices that are useful in addressing lung cancer; requiring the Department to
3 select grant awards based on the recommendations of the Department of
4 Business and Economic Development's Life Sciences Advisory Board; requiring
5 that priority be given to certain grants; requiring the Governor to include a
6 certain amount of funding in the budget for the Lung Cancer Biotechnology
7 Research and Development Component; establishing requirements that must be
8 met before an applicant may receive a grant from the Lung Cancer
9 Biotechnology Research and Development Component; prohibiting the
10 Department of Health and Mental Hygiene from awarding a certain grant
11 unless the Department first makes certain determinations; requiring that
12 certain Academic Health Centers be given priority in awarding Statewide
13 Academic Health Center Research Grants; requiring the Secretary of Health
14 and Mental Hygiene to adopt certain regulations; defining certain terms; and
15 generally relating to the Cancer Prevention, Education, Screening, and
16 Treatment Program.

17 BY repealing and reenacting, without amendments,
18 Article – Health – General
19 Section 13–1101(a), (e), and (u) and 13–1102(a), (b), (e)(1), and (f)(1)
20 Annotated Code of Maryland
21 (2009 Replacement Volume and 2011 Supplement)

22 BY adding to
23 Article – Health – General
24 Section 13–1101(n–1) and (n–2) and 13–1117 through 13–1120
25 Annotated Code of Maryland
26 (2009 Replacement Volume and 2011 Supplement)

27 BY repealing and reenacting, with amendments,
28 Article – Health – General
29 Section 13–1102(c) and 13–1116(a)(1)(ii)
30 Annotated Code of Maryland
31 (2009 Replacement Volume and 2011 Supplement)

32 BY repealing and reenacting, without amendments,
33 Article – State Finance and Procurement
34 Section 7–317(a) and (f)(1)(ii)
35 Annotated Code of Maryland
36 (2009 Replacement Volume and 2011 Supplement)

37 Preamble

38 WHEREAS, In 1998 the State of Maryland entered into a Master Settlement
39 Agreement (MSA) with certain tobacco companies that provided yearly funding to
40 Maryland as compensation for health consequences associated with smoking
41 cigarettes; and

1 WHEREAS, To date, Maryland has received at least \$1,500,000,000 from the
2 tobacco companies as a result of the MSA, with approximately \$150,000,000 received
3 in fiscal year 2012, and annual payments anticipated for the next 15 years; and

4 WHEREAS, According to the Biotechnology Industry Organization, 16 states
5 have used part of their MSA funding to support their biotechnology industry while
6 Maryland has not used any of its MSA funds to support its biotechnology industry; and

7 WHEREAS, MSA funding has been used to support screening for breast,
8 prostate, and cervical cancers although these cancers are not closely associated with
9 cigarette smoking; and

10 WHEREAS, To date, MSA funding has not supported screening for lung cancer,
11 which is closely associated with cigarette smoking; and

12 WHEREAS, Lung cancer is the leading cancer killer in Maryland, resulting in
13 more deaths than breast, prostate, and colon cancers combined; and

14 WHEREAS, New molecularly targeted lung cancer treatments are being rapidly
15 approved in the United States after only a few years of development, and these
16 therapies are based on the field of personalized medicine that was identified as a core
17 competency of Maryland's life science community in the BioMaryland 2020 Plan; and

18 WHEREAS, The 5-year survival rate for patients diagnosed at an early stage of
19 lung cancer is about 80% and declines dramatically to less than 5% for patients
20 diagnosed at the latest stages; and

21 WHEREAS, Because there have not been widely utilized lung cancer screening
22 tests, the disease is caught late 85% of the time; and

23 WHEREAS, In August 2011, the results of the National Lung Cancer Screening
24 Trial, which was a 7-year, \$250,000,000 study, were published, proving conclusively
25 that early detection of lung cancer can save substantial numbers of lives – likely more
26 than can be saved from the early detection of most other cancers; and

27 WHEREAS, According to the Department of Health and Mental Hygiene, the
28 following counties in Maryland have lung cancer mortality rates more than 25% above
29 the national rate: Baltimore City, Caroline, Cecil, Charles, Dorchester, Somerset, and
30 Wicomico; and the following counties have lung cancer mortality rates more than 10%
31 above the national rate: Anne Arundel, Calvert, Harford, Kent, St. Mary's, and Queen
32 Anne's; and

33 WHEREAS, Early detection of lung cancer can save the lives of thousands of
34 Marylanders while reducing the costs of terminal cancer treatments; now, therefore,

1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
2 MARYLAND, That the Laws of Maryland read as follows:

3 **Article – Health – General**

4 13–1101.

5 (a) In this subtitle the following words have the meanings indicated.

6 (e) “Cigarette Restitution Fund” means the fund that is established under §
7 7–317 of the State Finance and Procurement Article.

8 **(N–1) “LUNG CANCER BIOTECHNOLOGY RESEARCH AND DEVELOPMENT**
9 **COMPONENT” MEANS THE COMPONENT OF THE PROGRAM THAT IS**
10 **ESTABLISHED UNDER § 13–1119 OF THIS SUBTITLE.**

11 **(N–2) “LUNG CANCER SCREENING COMPONENT” MEANS THE**
12 **COMPONENT OF THE PROGRAM THAT IS ESTABLISHED UNDER § 13–1117 OF**
13 **THIS SUBTITLE.**

14 (u) “Screening” includes screening, early detection, identification, diagnosis,
15 and outreach efforts associated with screening and early detection programs.

16 13–1102.

17 (a) There is a Cancer Prevention, Education, Screening, and Treatment
18 Program in the Department.

19 (b) The purpose of the Program is to coordinate the State’s use of the
20 Cigarette Restitution Fund so as to create a lasting legacy of public health initiatives
21 that reduce mortality and morbidity rates for cancer and tobacco–related diseases in
22 the State and otherwise benefit the health and welfare of the State’s residents.

23 (c) The Program consists of:

24 (1) A Surveillance and Evaluation Component;

25 (2) A Statewide Public Health Component;

26 (3) A Local Public Health Component;

27 (4) A Statewide Academic Health Center Component; [and]

28 **(5) A LUNG CANCER SCREENING COMPONENT;**

1 **(6) A LUNG CANCER BIOTECHNOLOGY RESEARCH AND**
2 **DEVELOPMENT COMPONENT; AND**

3 **[(5)] (7)** An Administrative Component.

4 (e) (1) The Program shall be funded as provided in the State budget with
5 money from the Cigarette Restitution Fund.

6 (f) (1) The annual budget bill shall specify the amount of funding that is
7 allocated to each component of the Program.

8 13-1116.

9 (a) (1) (ii) For fiscal year 2013 and each fiscal year thereafter:

10 1. The Governor shall include at least \$13,000,000 in the
11 annual budget in appropriations for the Statewide Academic Health Center Cancer
12 Research Grants under this section; and

13 2. **[The] SUBJECT TO SUBPARAGRAPH (III) OF THIS**
14 **PARAGRAPH, THE** grants shall be distributed according to historical allocations
15 between the Academic Health Centers.

16 **(III) IN AWARDING THE GRANTS, PRIORITY SHALL BE GIVEN**
17 **TO ACADEMIC HEALTH CENTERS THAT HAVE CONTRACTS WITH MARYLAND**
18 **COMPANIES REASONABLY LIKELY TO LEAD TO COMMERCIALIZATION OF**
19 **PRODUCTS IN MARYLAND WITHIN 3 TO 5 YEARS AFTER THE GRANT IS AWARDED.**

20 13-1117.

21 **(A) THERE IS A LUNG CANCER SCREENING COMPONENT IN THE**
22 **PROGRAM.**

23 **(B) (1) THE PURPOSE OF THE LUNG CANCER SCREENING**
24 **COMPONENT IS TO PROVIDE REIMBURSEMENT IN THE FORM OF VOUCHERS FOR**
25 **LUNG CANCER SCREENING.**

26 **(2) THE LUNG CANCER SCREENING COMPONENT SHALL BE**
27 **ADMINISTERED BY THE DEPARTMENT.**

28 **(3) THE LUNG CANCER MEDICAL COMMITTEE SHALL AID THE**
29 **DEPARTMENT IN ADMINISTERING THE LUNG CANCER SCREENING COMPONENT**
30 **AS PROVIDED IN § 13-1118 OF THIS SUBTITLE.**

1 **(C) (1) THERE IS A LUNG CANCER MEDICAL COMMITTEE IN THE**
2 **DEPARTMENT.**

3 **(2) THE LUNG CANCER MEDICAL COMMITTEE SHALL CONSIST**
4 **OF FIVE MEMBERS, APPOINTED BY THE GOVERNOR ON RECOMMENDATION**
5 **FROM THE SECRETARY.**

6 **(3) THE LUNG CANCER MEDICAL COMMITTEE SHALL CONSIST**
7 **OF:**

8 **(I) AT LEAST ONE PHYSICIAN WHO PRACTICES MEDICINE**
9 **IN MARYLAND IN THE AREA OF PRIMARY CARE;**

10 **(II) AT LEAST ONE PHYSICIAN WHO PRACTICES MEDICINE**
11 **IN MARYLAND IN THE AREA OF PULMONARY CARE;**

12 **(III) AT LEAST ONE PHYSICIAN WHO PRACTICES MEDICINE**
13 **IN MARYLAND IN THE AREA OF ONCOLOGY; AND**

14 **(IV) AT LEAST ONE PHYSICIAN WHO PRACTICES MEDICINE**
15 **IN MARYLAND IN THE AREA OF THORACIC SURGERY.**

16 **(4) AT LEAST TWO OF THE PHYSICIANS ON THE LUNG CANCER**
17 **MEDICAL COMMITTEE SHALL PRACTICE MEDICINE IN COUNTIES THAT HAVE**
18 **LUNG CANCER MORTALITY RATES ABOVE THE NATIONAL AVERAGE.**

19 **(5) AT LEAST ONE MEMBER OF THE LUNG CANCER MEDICAL**
20 **COMMITTEE SHALL HAVE EXPERIENCE IN CANCER DIAGNOSTICS WITH EITHER**
21 **JOHNS HOPKINS UNIVERSITY OR THE UNIVERSITY OF MARYLAND.**

22 **(D) THE LUNG CANCER MEDICAL COMMITTEE SHALL DETERMINE**
23 **WHICH TESTS AND TEST PROVIDERS ARE ELIGIBLE FOR REIMBURSEMENT**
24 **UNDER THE LUNG CANCER SCREENING COMPONENT IN ACCORDANCE WITH §**
25 **13-1118 OF THIS SUBTITLE.**

26 **(E) THE COMPOSITION OF THE LUNG CANCER MEDICAL COMMITTEE**
27 **SHALL REFLECT THE RACIAL AND GENDER DIVERSITY OF THE POPULATION OF**
28 **THE STATE.**

29 **(F) (1) THE TERM OF A LUNG CANCER MEDICAL COMMITTEE**
30 **MEMBER IS 2 YEARS.**

1 **(2) AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE**
2 **UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES.**

3 **(3) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN**
4 **SERVES ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS**
5 **APPOINTED AND QUALIFIES.**

6 **(G) THE GOVERNOR MAY REMOVE A MEMBER OF THE LUNG CANCER**
7 **MEDICAL COMMITTEE FOR INCOMPETENCE, MISCONDUCT, OR FAILURE TO**
8 **PERFORM THE DUTIES OF THE POSITION.**

9 **(H) THE GOVERNOR SHALL SELECT A CHAIR FROM AMONG THE**
10 **MEMBERS OF THE LUNG CANCER MEDICAL COMMITTEE.**

11 **(I) THE LUNG CANCER MEDICAL COMMITTEE MAY ACT WITH AN**
12 **AFFIRMATIVE VOTE OF A MAJORITY OF ITS MEMBERS.**

13 **(J) A MEMBER OF THE LUNG CANCER MEDICAL COMMITTEE:**

14 **(1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE**
15 **LUNG CANCER MEDICAL COMMITTEE; BUT**

16 **(2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE**
17 **STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE**
18 **BUDGET.**

19 **13-1118.**

20 **(A) IN THIS SECTION, "COMMITTEE" MEANS THE LUNG CANCER**
21 **MEDICAL COMMITTEE ESTABLISHED UNDER § 13-1117 OF THIS SUBTITLE.**

22 **(B) FOR FISCAL YEAR 2014 AND EACH SUBSEQUENT FISCAL YEAR, THE**
23 **GOVERNOR SHALL INCLUDE AT LEAST \$5,000,000 IN THE ANNUAL BUDGET IN**
24 **APPROPRIATIONS FOR THE LUNG CANCER SCREENING COMPONENT.**

25 **(C) (1) THE COMMITTEE SHALL DISTRIBUTE FUNDS APPROPRIATED**
26 **UNDER SUBSECTION (B) OF THIS SECTION IN THE FORM OF LUNG CANCER**
27 **SCREENING TEST VOUCHERS.**

28 **(2) THE DEPARTMENT MAY MAKE ELIGIBLE REIMBURSEMENT**
29 **VOUCHERS FOR CERTAIN TYPES OF TESTING, INCLUDING:**

30 **(I) SEROLOGICAL TESTING;**

1 (II) HISTOLOGICAL TESTING; AND

2 (III) RADIOGRAPHIC TESTING.

3 (3) THE DEPARTMENT MAY MAKE ELIGIBLE REIMBURSEMENT
4 VOUCHERS FOR NOVEL AND INNOVATIVE TESTS BY PROVISIONAL APPROVAL
5 FOR A LIMITED PERIOD OF TIME SUFFICIENT TO PERMIT THE COLLECTION AND
6 ANALYSIS OF EVIDENCE TO DETERMINE WHETHER THE BENEFITS OF SUCH
7 TESTS EXCEED THEIR COSTS AND RISKS.

8 (4) LUNG CANCER SCREENING TEST VOUCHERS SHALL BE
9 DISTRIBUTED TO LICENSED PHYSICIANS IN MARYLAND ON APPLICATION TO
10 THE DEPARTMENT.

11 (5) A PHYSICIAN RECEIVING A LUNG CANCER SCREENING TEST
12 VOUCHER SHALL REFER A PATIENT TO AN ELIGIBLE LUNG CANCER SCREENING
13 TEST PROVIDER FOR EACH VOUCHER RECEIVED.

14 (6) (I) A LUNG CANCER SCREENING TEST PROVIDER SHALL
15 APPLY TO THE DEPARTMENT FOR APPROVAL AS AN ELIGIBLE PROVIDER IN THE
16 LUNG CANCER SCREENING COMPONENT.

17 (II) THE COMMITTEE SHALL APPROVE LUNG CANCER
18 SCREENING TEST PROVIDERS WHO OFFER TESTS THAT DEMONSTRATE A
19 REASONABLE POTENTIAL TO BE BENEFICIAL TO PATIENTS IN MARYLAND WHO
20 ARE AT ABOVE AVERAGE RISK FOR LUNG CANCER.

21 (III) AN ELIGIBLE PROVIDER SHALL ACCEPT A TEST
22 VOUCHER AS COMPENSATION FOR PROVIDING LUNG CANCER SCREENING TESTS
23 FOR A PATIENT.

24 (IV) THE DEPARTMENT SHALL REIMBURSE AN ELIGIBLE
25 PROVIDER ON SUBMISSION OF A LUNG CANCER SCREENING TEST VOUCHER TO
26 THE DEPARTMENT.

27 (V) THE DEPARTMENT SHALL ESTABLISH THE
28 REIMBURSEMENT RATES FOR LUNG CANCER SCREENING TEST VOUCHERS.

29 (D) THE SECRETARY SHALL ADOPT REGULATIONS TO IMPLEMENT THIS
30 SECTION.

31 13-1119.

1 **(A) THERE IS A LUNG CANCER BIOTECHNOLOGY RESEARCH AND**
2 **DEVELOPMENT COMPONENT IN THE PROGRAM.**

3 **(B) THE PURPOSE OF THE LUNG CANCER BIOTECHNOLOGY RESEARCH**
4 **AND DEVELOPMENT COMPONENT IS TO PROVIDE FUNDING IN THE FORM OF**
5 **GRANTS FOR RESEARCH AND DEVELOPMENT OF THERAPEUTIC, DIAGNOSTIC,**
6 **AND MEDICAL DEVICES USEFUL IN ADDRESSING LUNG CANCER.**

7 **(C) (1) SUBJECT TO § 13-1120 OF THIS SUBTITLE, THE DEPARTMENT**
8 **SHALL IMPLEMENT THE LUNG CANCER BIOTECHNOLOGY RESEARCH AND**
9 **DEVELOPMENT COMPONENT BY DISTRIBUTING LUNG CANCER**
10 **BIOTECHNOLOGY RESEARCH AND DEVELOPMENT GRANTS, AS PROVIDED**
11 **UNDER § 13-1120 OF THIS SUBTITLE.**

12 **(2) SELECTION AND ADMINISTRATION OF GRANT AWARDS SHALL**
13 **BE BY THE DEPARTMENT BASED ON THE RECOMMENDATIONS OF THE**
14 **DEPARTMENT OF BUSINESS AND ECONOMIC DEVELOPMENT'S LIFE SCIENCES**
15 **ADVISORY BOARD.**

16 **(3) PRIORITY FOR GRANT AWARDS SHALL BE GIVEN TO:**

17 **(I) APPLICANTS WHO CAN DEMONSTRATE THAT THE**
18 **FUNDING WILL LEAD TO THE CREATION OF JOBS IN MARYLAND THAT CAN BE**
19 **SUSTAINED WITHOUT PERPETUAL GOVERNMENT FUNDING, INCLUDING**
20 **MANUFACTURING JOBS;**

21 **(II) MEDICAL DEVICE AND DIAGNOSTIC PROJECTS THAT**
22 **CAN BE COMMERCIALIZED WITHIN 12 MONTHS FOLLOWING THE END OF THE**
23 **GRANT PERIOD; AND**

24 **(III) THERAPEUTIC PROJECTS THAT CAN BE**
25 **COMMERCIALIZED WITHIN 36 MONTHS FOLLOWING THE END OF THE GRANT**
26 **PERIOD.**

27 **13-1120.**

28 **(A) (1) FOR FISCAL YEAR 2014 AND EACH FISCAL YEAR THEREAFTER,**
29 **THE GOVERNOR SHALL INCLUDE AT LEAST \$2,500,000 IN THE ANNUAL BUDGET**
30 **IN APPROPRIATIONS FOR THE LUNG CANCER BIOTECHNOLOGY RESEARCH AND**
31 **DEVELOPMENT GRANTS UNDER THIS SECTION.**

1 **(2) SUBJECT TO THE OTHER PROVISIONS OF THIS SECTION, THE**
2 **DEPARTMENT MAY DISTRIBUTE THE LUNG CANCER BIOTECHNOLOGY**
3 **RESEARCH AND DEVELOPMENT GRANTS TO FOR-PROFIT ENTITIES FOR THE**
4 **PURPOSE OF RESEARCH ACTIVITIES THAT MAY LEAD TO THE DEVELOPMENT OF**
5 **THERAPEUTIC, DIAGNOSTIC, AND MEDICAL DEVICES USEFUL IN ADDRESSING**
6 **TOBACCO-RELATED DISEASES.**

7 **(B) BEFORE RECEIVING A LUNG CANCER BIOTECHNOLOGY RESEARCH**
8 **AND DEVELOPMENT GRANT, AN APPLICANT SHALL:**

9 **(1) SUBMIT A CANCER RESEARCH PLAN THAT:**

10 **(i) PROVIDES A DETAILED PLAN AS TO HOW THE UNG**
11 **CANCER BIOTECHNOLOGY RESEARCH AND DEVELOPMENT GRANT WILL BE**
12 **SPENT AND HOW IT WILL BE USED TO MEET THE GOALS ESTABLISHED BY THE**
13 **DEPARTMENT;**

14 **(ii) PROVIDES A COMPLETE INVENTORY OF ALL LUNG**
15 **CANCER TREATMENT TECHNOLOGY THAT IS CURRENTLY BEING DEVELOPED BY**
16 **THE APPLICANT;**

17 **(iii) SPECIFIES THE SOURCE AND AMOUNT OF FUNDING FOR**
18 **ALL OF THE LUNG CANCER TREATMENT TECHNOLOGY IDENTIFIED UNDER ITEM**
19 **(ii) OF THIS ITEM; AND**

20 **(iv) INCLUDES ANY OTHER INFORMATION THAT IS**
21 **REQUESTED BY THE DEPARTMENT; AND**

22 **(2) ENTER INTO A MEMORANDUM OF UNDERSTANDING WITH THE**
23 **DEPARTMENT, THE DEPARTMENT OF BUSINESS AND ECONOMIC**
24 **DEVELOPMENT, AND THE MARYLAND TECHNOLOGY DEVELOPMENT**
25 **CORPORATION THAT:**

26 **(i) ESTABLISHES THE SCOPE OF THE STATE'S OWNERSHIP**
27 **OR OTHER FINANCIAL INTEREST IN THE COMMERCIALIZATION AND OTHER**
28 **BENEFITS OF THE RESULTS, PRODUCTS, INVENTIONS, AND DISCOVERIES OF**
29 **LUNG CANCER TREATMENT TECHNOLOGY FUNDED BY A LUNG CANCER**
30 **BIOTECHNOLOGY RESEARCH AND DEVELOPMENT GRANT;**

31 **(ii) ESTABLISHES A PLAN FOR EXPEDITING THE**
32 **TRANSLATION OF LUNG CANCER TREATMENT TECHNOLOGY INTO PRODUCTION**
33 **FOR PUBLIC USE;**

1 **(III) TO THE EXTENT CONSISTENT WITH FEDERAL AND**
2 **STATE LAW, REFLECTS THE INTELLECTUAL PROPERTY POLICIES OF THE**
3 **PROGRAM; AND**

4 **(IV) REQUIRES THE GRANTEE TO REPAY TO THE STATE**
5 **150% OF THE VALUE OF THE GRANT THROUGH ROYALTIES ON SALES OF LUNG**
6 **CANCER PRODUCTS DEVELOPED WITH THE GRANT.**

7 **(C) A MEMORANDUM OF UNDERSTANDING ESTABLISHED UNDER**
8 **SUBSECTION (B)(2) OF THIS SECTION MAY ALLOW FOR THE SELECTION OF A**
9 **PRIVATE ENTITY TO EXPEDITE THE TRANSLATION OF LUNG CANCER**
10 **TREATMENT TECHNOLOGY INTO PRODUCTION FOR PUBLIC USE.**

11 **(D) THE DEPARTMENT MAY NOT DISTRIBUTE A LUNG CANCER**
12 **BIOTECHNOLOGY RESEARCH AND DEVELOPMENT GRANT UNLESS THE**
13 **DEPARTMENT FIRST DETERMINES THAT:**

14 **(1) A LUNG CANCER TREATMENT TECHNOLOGY WILL HELP**
15 **ACHIEVE THE PURPOSE OF THE PROGRAM;**

16 **(2) THE GRANT WILL BE USED TO FUND LUNG CANCER**
17 **TREATMENT TECHNOLOGY;**

18 **(3) THE APPLICANT HAS EXECUTED A MEMORANDUM OF**
19 **UNDERSTANDING AS REQUIRED BY SUBSECTION (B)(2) OF THIS SECTION; AND**

20 **(4) THE APPLICANT SATISFIES ANY OTHER REQUIREMENT**
21 **ESTABLISHED BY THE DEPARTMENT AS A CONDITION OF RECEIVING THE**
22 **GRANT.**

23 **Article – State Finance and Procurement**

24 7–317.

25 (a) There is a Cigarette Restitution Fund.

26 (f) (1) The Cigarette Restitution Fund shall be used to fund:

27 (ii) the Cancer Prevention, Education, Screening, and
28 Treatment Program established under Title 13, Subtitle 11 of the Health – General
29 Article; and

30 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
31 October 1, 2012.